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1 hereby appoint:							
x Practitioners associated with the Customer Number: OR Practitioner(s) named below (if more than ten patent practit			25096			er must be used):	
Name		Registration Number		Name			Registration Number
eny and all pater	agent(s) to represent the unders it applications essigned galy to the erm in accordance with 37 CFR :	re undersigned accor	ed States Pat ding to the US	eni and Trad IPTO assigni	smark C	Office (UBPTO) in cords or assignmen	conscion with it documents
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Assignse Name and Address: Bassilic Technologies LLC 160 Greentree Drive, Suite 101 Dover, Delaware 19904							
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Alterney is to be filed.							
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized toxect on behalf of the assignee							
Signature	9	12		Date 10	/22	108	
Name	Jeremiah Miller			Telaphone			
Title	Authorized Person for Bassilic Technologies LLC						